After discovery of malaria parasites and their transmission by Anophelines, until recently, malaria was antroponotic disease caused by four *Plasmodium* species. These parasites were circulated among humans by different vectors around the world. Coatney [1] reported the first known case of naturally infected simian malaria, *Plasmodium knowlesi*, in human [1,2]. Near to half of century later that discovery, with applying molecular techniques, detection and identification of simian malaria, especially *P. knowlesi* was renewed [3]. Recently, Baird [4] revised the biology and medicine of zoonoses malaria [4]. Cox-Singh [5] indicated the role of other simian malaria, *P. inui* and *P. simonology*, in human infection at Southeast Asia [5].

It is clear that epidemiologic pattern of malaria is going to be changed to both antroponotic and zoonoses. In this case there were many gaps which should have been filled. They are including the risk of *P. knowlesi* and other simian malaria, the prevalence of these parasite among macaque hosts, human to human transmission of these parasites, mix infection of antroponotic and zoonoses parasites.

This new epidemiologic picture of malaria reveals that previously diagnosis and control methods should have been revised and the elimination program of malaria would have essential challenges.

**References**